# Michigan Maternal Infant Health Program Program Overview/Design

## Premise

The existing MSS program will be modified and enhanced to more effectively engage and retain high-risk women that are not currently being reached. This program will build a statewide registry with web-capable access and will be efficient, centralized, consistent, and provide the best opportunity for outcomes measurement and reporting.

## Program Implementation

Phased-in approach can begin 10-1-05, with continuing enhancements over 2-3 years

## Centralized Management and Tracking

- Registry utilized for tracking and reporting reminder/recalls
- Program management remains centralized at MDCH

## Case Finding, Assessment, and Intervention

- Outreach focused on engaging Medicaid pregnant women
  - o Providing highest intensity services to highest risk women
- Must include WIC
- Targeted screening, assessment, and risk stratification
- Domains of care:
  - > Smoking
  - Nutrition
  - Chronic disease
  - Alcohol/substance abuse
  - Domestic violence
  - Behavioral health
  - Pregnancy complications/short inter-pregnancy interval
  - Emergent basic needs

## Performance Expectation and Feedback

- Performance expectations clearly defined and required for participation
- Technical assistance and support
- Common care plan
- Ongoing monitoring and feedback
  - 2-way data exchange and reporting
- Incentives based on performance
  - Increasing expectations over time

#### Reimbursement

- Shift from per visit reimbursement to multi tier reimbursement rates
  - Based on risk level and service intensity
  - Build in performance incentives